



Foodservice Establishment Inspection Report

Establishment Information	
Facility Name POP-IN	Facility Type Very Small Non Potentially Hazardous
Facility ID # THAS-9Y2NTD	Facility Telephone # 715
Facility Address 212 E WALL ST EAGLE RIVER , WI 54521	
Licensee Name CHAD CONWAY	Licensee Address PO BOX 1508 EAGLE RIVER , WI 54521

Inspection Information		
Inspection Type Pre-inspection	Inspection Date 07/02/2015	Total Time Spent

OPERATOR - The violations in operating procedure or physical arrangement indicated below must be corrected by the next routine inspection or by a date specified in this report.

Observed Violations
Total # 0

Comments
Put Milkboard anywhere there is food prep, processing or dishwashing. Need hand wash signs by hand wash sink and in bathroom. Send pictures when all set up before you open.

Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in ch.227 statute, if state licensed, or a local ordinance if licensed by an agent health department.

Person in Charge

Sanitarian

TAYLOR HAYNES